									Application or Docket Number					
	PATENT A	RD	10/65/327											
CLAIMS AS FILED - PART (Cotumn 2)									SMALL ENTITY OTHER TH					
TOTAL CLAIMS								RAT	Έ	FEE		RATE	FEE	
FOR			NUMBER F	aE0	NUMBE		BASIC	FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			1.8 minus 20=		0			XS :	9=		OR	XS18=		
INDEPENDENT CLAIMS			8 mir	าบร 3 =	•		X43) <u>.</u>	315	ŎA	X86=			
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				+14	5=		OR	+290=			
- 11	the difference	in.column 1 is i	ess than zero, enter "0" in column 2					TOT	AL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									1	ENTITY	OR	OTHER SMALL		
	•	(Column 1)		Ļ		1LL		<u>بر</u>		ADDI-				
	•	··· CLAIMS REMAINING		HIGH		PRESENT		l		ADDI-		RATE	TIONAL	
TA		AFTER		PREVA	UUSLY	EXTRA		RA	E	TIONAL FEE		, naic	FEE	
조		AMENDMENT		PAID	FOR		-{			 				
AMENDMENT	Total	. 10	Minus	-0	<u>20 </u>	.0	4	xs	9=		OR	XS18=		
ME	Independent	. 4	Minus	***	X	- 2	-{	X4	3=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+14	5=		OR	+290=		
								-	OTAL		ОЯ	TOTAL		
								ADDIT	FEE		10	ADDIT. FEE		
(Column 1) (Column 2) (Column 3														
	. K	CLAIMS			HEST		1			ADDI-	l		ADDI-	
9	1,9.08	REMAINING	1		ABER KOUSLY	PRESENT		RA	TE	TIONAL		RATE	TIONAL FEE	
	9.419	AMENDMENT			FOR		4	<u> </u>		FEE	ł		FEE	
AMENDMENT B	Total	• 10	Minus	-0	<u> 20 </u>	J	4	xs	9=		OR	XS18=		
ME	Independent	• 4	Minus		8	1=/	4	X4	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-14	15=	l	OR	1		
									OTAL		OR	ADOIT, FE		
i e								ADDI	, FEE		. .	ADON. FE		
		(Column 1)		(Colu	ımn 2}	(Calumn	31				_			
	1	CLAIMS			HEST		.]			ADDI-			ADDI-	
10	3-794	REMAINING AFTER	1		MBER 10USLY	PRESENT	' 	R	TE	TIONAL	1	RATE	TIONAL	
IΞ		AMENDMENT			FOR		_			FEE/	4]	FEE	
AMENDMENT C	Total	. 2	Minus	- 1	W	.0	┧.	XS	94		ОЯ	XS18=	<u> </u>	
	Independent	. 2	Minus		8,	1.0	1	X	:3=	X	OF	X86=	l	
١Į٤	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	1		T	
											ОЯ	+290=	1	
	II the entry in colu	ımın I is less than	the entry in cod	umn 2, wr	te T in c	atumn 3.	•		ØTA		OF	TOTA		
in the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20. ADDIT. FEE L.														
-	M teargist ent tr No Trighest No	umber Previously I mber Previously P	aid For' (Total	or Indepen	rdend is th	e highest nur	mber	iound In	the a	ppropriate b	or in c	column 1.		